## BEST AVAILABLE COPY

									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD  Effective December 29, 1999  O9 614572													
CLAIMS AS FILED - PART I (Column 1) (Column 2)							LL E	ENTITY	OR	OTHER SMALL			
FOR NUM			BER FILED NUMBER EXT			RAT	Ē	FEE	] [	RATE	FEE		
ВА	SIC FEE							345.00	OR		690.00		
ΤÔ	TAL CLAIMS	30	3 2 minus 20= * /2			X\$		مه معالی توریخ از پر کاران در این	OR	X\$18=	216		
IND	EPENDENT CL	AIMS 7	minus 3 = * 4			X39=			OR	X78=	312		
MULTIPLE DEPENDENT CLAIM PRESENT							0=		OR	·+260=			
• 16	* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		TOTAL	1215		
CLAIMS AS AMENDED - PART II									OR	OTHER	THAN		
	(Column 1) (Column 2) (Column 3)					SMA	SMALL ENTITY			SMALL	ENTITY		
MENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	**	=	X\$	9=		OR	X\$18=			
MEN	Independent	•	Minus	***	=	X39	<del>)</del> =		OR	X78=	,		
<b>∀</b>	FIRST PRESE	NTATION OF ML	ILTIPLE DEP	ENDENT CLAIM		+13	n-		OR	+260=			
						L	ÖTAL		┫ <sub>╱╏</sub> ╵	TOTAL			
	(Column 1) (Column 2) (Column 3)					ADDIT.	FEE		<b>1</b> 0	ADDIT. FEE			
_	Mother to a wiff the	(Column 1) CLAIMS	S 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	HIGHEST	(Coldinii o/			ADDI-	7	<del></del>	ADDI-		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	TIONAL FEE		RATE	TIONAL FEE		
	Total	•	Minus	**	=	X\$	9=		OR	X\$18=			
	Independent	•	Minus	***	=	ХЗ	9=		OR	X78=			
Ľ	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT CLAIM		+13	20_		OR	+260=			
							OTAL		4	TOTAL	<del> </del>		
							FEE		OR	ADDIT. FEE			
_		(Column 1)	γ	(Column 2)	(Column 3)	) ]			-		1 4001		
NT C		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total		Minus	**	=	X\$	9= ·		OR	X\$18=			
AMENDMENT	Independent	•	Minus	***	=	X3	9=	1	1	V70	1		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					J		-			+		
	· ·				alome 2		30=		OR		<u>.</u>		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

FORM PTO-875 (Rev. 12/99)

SERVICE CONTRACTOR